FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

Reset Form

FORM DR-2 (Rev. 05/2002)	DISCLOSURE REPORT

For Office Use Only
Comm. # _____
Indexed _____
Audited _____
Computer _____

COMMITTEE NAME *(Must be same as on Statement of Organization)*
SPECHT FOR SUPERVISOR

IMPORTANT: Indicate type of committee you are reporting for: ☐

(1)Statewide/Legislative Candidate (2)Statewide PAC (3)State Party (4)County/Local Candidate
(5)County PAC (6)Ballot Issue/Franchise Committee (7)County/City Central Committee
(8)Support Slate of Candidates

CANDIDATE COMMITTEES ONLY:

Candidate Name: PHILIP SPECHT
Political Party: DEMOCRAT
Office Sought: CLAYTON CO. SUPERVISOR
District (if Senate or House): _____

JAN 22 2003
FILED

Sharon Specht — **SIGNATURE OF TREASURER (or person filing this report)**
563-873-2498 — **TELEPHONE**
1-19-03 — **DATE SIGNED**

Routine Penalties Due For Late Filed Reports Range from $20 to $800

SEE INSTRUCTIONS ON BACK AND COMPLETE THE FOLLOWING SENTENCE:

I AM FILING A 1-19-03 (report date) REPORT FOR AN/A (1) **ELECTION** /(2)**NON-ELECTION** YEAR. Indicate one 1

☐ CHECK IF AMENDMENT TO REPORT DATED _____

☒ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3. (You must continue to file reports until a Notice of Dissolution is filed.)

Local Committees, enter Date of Election: 11-5-02
County & Local Committees, enter County in which Election is held: _____

STATEMENT OF CASH ON HAND

CASH ON HAND at the beginning of the reporting period. (This is the total of all monies held by the committee. This amount **MUST** be the same as the cash on hand at the end of the last reporting period, or must be zero if this is first report filed.) ..... $	648.06
ADD TOTAL MONEY TAKEN IN THIS PERIOD	
Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)	255.79
Schedule F: Loans Received total (Attach Schedule F)	0.00
Schedule H: Total Sales of Campaign Property (Attach Schedule H)	0.00
(Schedule H applies to Candidates' Committees Only)	
SUB-TOTAL.....$	903.85
SUBTRACT TOTAL MONEY SPENT THIS PERIOD	
Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below) ...	803.85
Schedule F: Loan Repayments total (Attach Schedule F)	100.00
CASH ON HAND at the end of this reporting period (if final report, balance must be zero) (Attach DR-3) ..... $	0.00
****UNPAID BILLS** (From Schedule D - Attach Schedule D) ..... $	0.00
***IN KIND CONTRIBUTIONS** (From Schedule E - Attach Schedule E) ..... $	0.00
****OUTSTANDING LOANS** (From Schedule F - Attach Schedule F) ..... $	0.00

CANDIDATE COMMITTEES ONLY:

CONSULTANT BREAKDOWN (Schedule G Attached?) ☐ YES ☒ NO

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H) $ 0.00

For Instructions, See Back of Form

Reset Form

SCHEDULE A (Rev. 06/97)	MONETARY RECEIPTS
☐ CHECK THIS BOX IF AMENDING FORM	

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

COMMITTEE NAME *(Must be same as on Statement of Organization)*
SPECHT FOR SUPERVISOR

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

CAUTION: Section 68B.32A(6), Iowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND-RAISER INCOME
10-19-02	ID# CK#	IVANELL DINAN 30892 DINAN RD ELKADER IA 52043		$ 25.00	☐
various	ID# CK#	PHIL SPECHT 28304 PLEASANT RIDGE RD MCGREGOR IA 52157	self	230.79	☐
	ID# CK#				☐
	ID# CK#				☐
	ID# CK#				☐
	ID# CK#				☐
	ID# CK#				☐
	ID# CK#				☐
	ID# CK#				☐
	ID# CK#				☐
			SUB-TOTAL	$ 255.79	
			TOTAL ***(if last page of this schedule)***	$	

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage) (See Page 2 of forms packet.). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page _____ of _____
(for Schedule A)

FOR INSTRUCTIONS, SEE BACK OF FORM

Reset Form

SCHEDULE **B** (Rev. 09/97)	MONETARY EXPENDITURES

☐ CHECK THIS BOX IF AMENDING FORM

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

COMMITTEE NAME *(Must be same as on Statement of Organization)*

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE *(Disbursement)* WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
10-21-02	ID# CK#	Postville Herald Leader 112 N. LAWLER, POSTVILLE IA 52162	ADS	$ 43.40
10-21-02	ID# CK#	Elgin Echo 227 CENTER ST ELGIN IA 52141	ADS	32.00
10-21-02	ID# CK#	Strawberry Pt. Journal STRAWBERRY PT IA 52076	ADS	58.50
10-21-02	ID# CK#	Edgewood Reminder EDGEWOOD, IA 52042	ADS	30.00
10-21-02	ID# CK#	Guttenberg Press 10 SCHILLER GUTTENBERG IA 52052	ADS	25.00
10-21-02	ID# CK#	CLAYTON CO. Register 106 CEDAR NW ELKADER IA 52043	ADS	81.95
10-21-02	ID# CK#	UBC HWY 13 N. ELKADER IA 52043	HIGHWAY SIGNS	55.50
10-29-02	ID# CK#	KCTN P.O. BOX 990 ELKADER IA 52043	RADIO ADS	410.00
			SUB-TOTAL	$ 736.35
			TOTAL (*If last page of this schedule*)	$

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing $500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 56.6(3)(i).)

(for Schedule B)

FOR INSTRUCTIONS, SEE BACK OF FORM

Reset Form

SCHEDULE **B** (Rev. 09/97)	MONETARY EXPENDITURES

☐ CHECK THIS BOX IF AMENDING FORM

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

COMMITTEE NAME *(Must be same as on Statement of Organization)*

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE *(Disbursement)* WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
12-03-02	ID# CK#	N.E IOWA TELEPHONE 113 N. PAGE ST MONONA, IA 52158	CABLE TV AD	$ 7.50
12-16-02	ID# CK#	CLAYTON CO. DEMOCRATS JUDY SCHNURSTEIN, CHAIR 208 E. BRIDGE ST ELKADER, IA. 52043	DISBURSMENT OF ALL CAMPAIGN FUNDS TO 0.00 BALANCE.	60.00
✓	ID# CK#			~~282.15~~
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
			SUB-TOTAL	$ 67.50
			TOTAL (*if last page of this schedule*)	$ 803.85

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing $500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 56.6(3)(i).)

(for Schedule B)

FOR INSTRUCTIONS, SEE BACK OF FORM

Reset Form

SCHEDULE **F** (Rev. 08/96)	**LOANS RECEIVED & REPAID**

☐ CHECK THIS BOX IF AMENDING FORM

COMMITTEE NAME *(Must be same as on Statement of Organization)*

Specht for Supervisor

NOTE: This schedule reports money loaned to the committee which is deposited in the committee account.

TOTAL UNPAID LOANS FROM LAST REPORTING PERIOD $ 100

PART I - MONETARY LOANS RECEIVED THIS REPORTING PERIOD
(Original source of loan, such as a bank, must be shown if a third party is involved. Include loans from candidate's personal funds.)

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable)	RELATIONSHIP TO CANDIDATE (If Applicable*)	AMOUNT OF LOAN
			$

TOTAL *(PART I)* $ _____

PART II - MONETARY LOAN REPAYMENTS MADE THIS REPORTING PERIOD
(Loans forgiven must be reported on Schedule E -- In-kind Contributions.)

DATE PAID (MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable)	RELATIONSHIP TO CANDIDATE* (If Applicable)	AMOUNT REPAID
11-01-02	Phil Specht 28304 Pleasant Ridge McGregor Iowa	self	$ 100.00

TOTAL CASH REPAYMENTS *(PART II)* $ 100.00

From Schedule E -- TOTAL LOANS FORGIVEN $ _____

TOTAL OUTSTANDING LOANS END OF REPORT PERIOD $ -0-

*Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). (See Page 2 of forms packet.) If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column when it applies.

Notice of Dissolution

Reset Form

Clayton

FORM (Rev. 07/02)

DR-3
NOTICE OF DISSOLUTION

For Office Use Only

Comm. # _____
Indexed _____
Audited _____
Computer _____
Certified Date of Dissolution _____

JAN 2 2 2003

FILED

COMMITTEE NAME

SPECHT FOR SUPERVISOR
Official Name of Committee

28304 PLEASANT RIDGE RD
Street

MC GREGOR IA 52157
City, State, Zip Code

563 873-2498
Area Code Telephone

WHEN TO FILE:

The Notice of Dissolution must be filed within thirty (30) days of completion of all the following:

1. All debts, loans and obligations have been paid or transferred;
2. All campaign funds have been spent;
3. All campaign property sold or transferred (candidates only); and
4. A final report disclosing all transactions closing the committee.

For state candidates and state PACs, a final bank statement must be filed with the Notice of Dissolution or as soon as possible if the bank statement is not available at the time the Notice of Dissolution is filed.

Sharon Specht
Signature of Candidate or Treasurer (if candidate's committee)/Signature of Chair or Treasurer (if PAC)

January 19, 2003
Date Signed

FOR INSTRUCTIONS, SEE BACK OF FORM
This form is not applicable to statutory political committees.